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ANNUAL REPORT				May 04, 2004 08:00 Secretary of Stat	
	MENT # L990000	05512		Seci	ctary or Stat
1. Entity Nam PALM BE	e EACH PLAZA ASSOCIAT	ES, L.L.C.			
Principal Place of Business 2925 10TH AVENUE NORTH LAKE WORTH, FL US C/O SCHUR MANAGEMENT CO 2432 GRAND CONCOURSE BRONX, NY 10458		, LTD.	04212004 No Chg-LLC CR2E083 (10/03) 4. FEI Number		
DO NOT WRITE IN THIS SPA					CE
	6. Name and Address of Curr	ent Registered Agent		1	•
SCHUR, ROBERT 5250 NORTH KENDALL DRIVE CORAL GABLES, FL 33456-2124			DO NOT WRITE IN THIS SPACE		
8. The above	named entity submits this statemetions of registered agent.	nt for the purpose of changing its register	I ed office or register	red agent, or both, in the State of Florida I a	am familiar with, and accept
	•				
SIGNATURE.	Signature typed or printed name of registered a	igent and title if applicable (NOTE Registere	d Agent signature required	Amen reinstating) DA1	TE
Fi Di	iling Fee is \$50.00 ue by May 1, 2004				
9.	·	MBERS/MANAGERS			
TITLE NAME STREET ADDRESS CITY SI-ZIP	MGR SCHUR, LAWRENCE 2432 GRAND CONCOURSE BRONX, NY 10458			0000001554 05./05./04-8001	103 35-024 50.00
THE NAME STREET ADDRESS CHY-ST-ZIP					
TITLE NAME STREET ADDRESS C/TY+ST-ZIP				DO NOT WRIT	ΓE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN THIS SPAC	E
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE			1		

11. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

NAME STREET ADDRESS CITY - ST - ZIP

SIGNATURE AND TYPED ON PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Daytime Phone #